CONSTABLE REVIEW BOARD FOR THE 6TH JUDICIAL DISTRICT OF PENNSYLVANIA

COMPLAINT

| | Your Name: |
|---------------|---|
| | Address: |
| | |
| | Telephone # |
| B. C | ONSTABLE COMPLAINED OF: Name: |
| | Contact Info: |
| | (if known) |
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| cond and a | TATEMENT OF COMPLAINT: PLEASE BE SPECIFIC, Describe the uct or practice complained of, the date(s) it occurred, names of witnesses attach copies of relevant documents. You may attach as many additional is as necessary to fully set forth your complaint. |
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The Complaint may be e-mailed, faxed, or mailed to the following:

Assistant Court Administrator Erie County Courthouse 140 West Sixth Street, Room 205 Erie, PA 16501

Fax: 814-451-6223

Email: CRBAdm@eriecountygov.org